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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) CHRISTOPHER P GIBSON									
	(b) Address (number and street) PO BOX 543	☐ Check if address changed			Candidate's FEC Identification Number H0NY20095					
_	(c) City, State, and ZIP Code						lew	Amended		
	KINDERHOOK		N,	Y 121	06		N) OR	(A)		
4.	Party Affiliation	5. Office Soug	ght		6. State & Distr	rict of Candidate				
	REPUBLICAN PARTY	House			NY	19			_	
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE										
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2014 (year of election)									
	NOTE: This designation should be filed with the appropriate office listed in the instructions.									
	(a) Name of Committee (in full) CHRIS GIBSON FOR CONGRESS									
	(b) Address (number and street) PO BOX 255									
-	(c) City, State, and ZIP Code								—	
	KINDERHOOK				NY	12106				
(Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee.										
(a) Name of Committee (in full) (FRESHMAN HOLD'EM JFC) FRESHMAN HOLD'EM, STUTZMAN FOR CONGRESS, GARDNER FOR CONGRESS 2012										
	(b) Address (number and street) 209 PENNSYLVANIA AVE SE								_	
	SUITE 2109									
	(c) City, State, and ZIP Code									
	WASHINGTON				DC	20003				
	I certify that I have exa	mined this Sta	tement and to	o the best o	f my knowledge a	nd belief it is true, correc	et and comple	e.	_	
Signature of Candidate Date										
C	HRISTOPHER P GIBSON			[Ele	ctronically Filed]	04/22/2014				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.										
				1						

FEC FORM 2 (REV. 02/2009)

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)			Page 2 / 3
DESIGNATION OF OTHER AUTH (Including Joint Fundraising			[ADDITIONAL]
beby authorize the following named committee, which is NOT my principal campaign candidacy.	n committee, to r	eceive and expend funds	s on behalf of my
NOTE:This designation should be filed with the principal campaign commi	ittee.		
(a) Name of Committee (in full) (FRESHMAN HOLD'EM JFC) FRESHMAN HOLD'EM, STUTZN	MAN FOR CO	ONGRESS, GARDN	IER FOR CONGRESS 2012
(b) Address (number and street) 209 PENNSYLVANIA AVE SE SUITE 2109			
(c) City, State and ZIP Code WASHINGTON	DC	20003	
DESIGNATION OF OTHER AUTH (Including Joint Fundraisin			[ADDITIONAL]

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

FRESHMAN AGRICULTURAL REPUBLICAN MEMBERS TRUST AKA FARM TRUST

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my

(b) Address (number and street)
PO BOX 30844

(c) City, State and ZIP Code
BETHESDA MD 20824

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ADDITIONAL]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE:This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

PATRIOT DAY I

(b) Address (number and street)
228 S WASHINGTON ST STE 115

(c) City, State and ZIP Code

ALEXANDRIA VA 22314

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 3 /
DES	IGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named com candidacy.	mittee, which is NOT my principal campaign committee, to receive and expen	d funds on behalf of my
NOTE: This designation should be f	iled with the principal campaign committee.	
(a) Name of Committee (in full) GIBSON REED VICTOR	ΓORY FUND	
(b) Address (number and street) 2470 DANIELLS BR RD STE 1	21	
(c) City, State and ZIP Code		
ATHENS	GA 30606	
DES	SIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	S [ADDITIONAL]
I hereby authorize the following named comcandidacy.	mittee, which is NOT my principal campaign committee, to receive and exper	nd funds on behalf of my
NOTE: This designation should be	iled with the principal campaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State and ZIP Code		
DES	SIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	G [ADDITIONAL]
I hereby authorize the following named comcandidacy.	mittee, which is NOT my principal campaign committee, to receive and exper	nd funds on behalf of my
NOTE:This designation should be	iled with the principal campaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State and ZIP Code		